POSITION	INITIALS	ID NO.	DATE
FEE DETERMINATION	*(illegible)*	7S331	
O.I.P.E. CLASSIFIER		43	3/30/50
FORMALITY REVIEW			
RESPONSE FORMALITY REVIEW			
		69300	

INDEX OF CLAIMS

✔	.... Rejected		N	.... Non-elected
=	.... Allowed		I	.... Interference
−	(Through numeral)... Canceled		A	.... Appeal
÷	.... Restricted		O	.... Objected

Claim		Date	Claim	Date	Claim	Date
Final	Original					
	1	✔ ✔ ✔ ✔	51		101	
	2		52		102	
	3		53		103	
	4		54		104	
	5		55		105	
	6		56		106	
	7		57		107	
	8		58		108	
	9		59		109	
	10		60		110	
	11		61		111	
	12		62		112	
	13		63		113	
	14		64		114	
	15		65		115	
	16		66		116	
	17		67		117	
	18		68		118	
	19		69		119	
	20		70		120	
	21		71		121	
	22		72		122	
	23		73		123	
	24		74		124	
	25		75		125	
	26		76		126	
	27		77		127	
	28		78		128	
	29		79		129	
	30		80		130	
	31		81		131	
	32		82		132	
	33		83		133	
	34		84		134	
	35		85		135	
	36		86		136	
	37		87		137	
	38		88		138	
	39		89		139	
	40		90		140	
	41		91		141	
	42		92		142	
	43		93		143	
	44		94		144	
	45		95		145	
	46	✔ ✔ ✔ ✔	96		146	
	47		97		147	
	48		98		148	
	49		99		149	
	50		100		150	

If more than 150 claims or 10 actions
staple additional sheet here

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